## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

					[TITLE]				
the specification of which is attached hereto unless the following space is checked:									
		was fil	ed on		as United Stat	es Application	Serial Number		
i c	t hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.								
(i	I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR § 1.56 (including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application).								
I hereby claim foreign priority benefits under 35 U.S.C. § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or PCT international application having a filing date before that of the application on which priority is claimed.									
P:			i(s): Country		Day/Month/Ye	ear Fi <u>led</u>			
I hereby appoint the practitioners associated with the Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith, and I direct that all correspondence be addressed to that Customer Number.									
	Princip	al attorne	er: 020306 y or agent: er: 312-913-		<u></u>				
in: Wi Ti	formation and illful false stat	l belief ard ements an Inited Sta	thelieved to be the the like so the total the like so the test Code and the test cod	oe true; and f made are pur	urther that these iishable by fine o	statements wer	re made with th L or both, unde	tements made on the knowledge that r Section 1001 of of the application	
	all name of firs				S HATZINI		عده هدر	2005	
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Residence: MELBOURDE AMKRALIA Citizenship: AMKCALIAN Post Office Address: 37 WATTLE GROVE RESE	دس، بد سرسره ۱۹۵۸ عن مهم میرده در م
Full name of second joint inventor:	
Inventor's signature: Residence: Citizenship: Post Office Address:	Date:
Full name of third joint inventor:  Inventor's signature: Residence: Citizenship: Post Office Address:	Date;
Full name of fourth joint inventor:  Inventor's signature:  Residence:	Date:
Citizenship; Post Office Address:	